(Del. Rev. 11/14) Pro Se General Complaint Form

FOR THE DISTRICT OF DELA  Acquel Lewis	And the second
(In the space above enter the full name(s) of the plaintiff(s).)	23 - 1 2 <sup>3</sup>
-against-	Civ. Action No(To be assigned by Clerk's Office)
ATRT	COMPLAINT (Pro Se)

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Section I. Do not include addresses here.)

### NOTICE

Federal Rule of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

If this is an employment discrimination claim or social security claim, please use a different form.

Plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

Jury Demand?

☐ Yes

## I. PARTIES IN THIS COMPLAINT

County, City

## **Plaintiff**

Plaintiff:

List your name, address and telephone number. If you are presently in custody, include your identification number and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

	Street Address			
	Wilmington	DE	19809	
	County, City	S	tate	Zip Code
	Telephone Number	ONL -	E-mail Addres	s (if available)
Defendant(s)				
government agenc each defendant ca	s. You should state the full na sy, an organization, a corpor n be served. Make sure that t bove caption. Attach addition	ation, or an the defenda	n individual. Ind int(s) listed belo	clude the address where ow are identical to those
Defendant 1:	ATOT C	Sipor	ate	
	Name (Last, First)			
	208 S. 1	AKAR	DST	eet
	Street Address			
	Dallas	-1	×	75262
	County, City	S	tate	Zip Code
Defendant 2:			***************************************	
	Name (Last, First)			
	Street Address		Name of the second	

State

Zip Code

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Defendant 3:			
	Name (Last, First)		
	Street Address		
	County, City	State	Zip Code
Defendant 4:			
	Name (Last, First)		
	Street Address		
	County, City	State	Zip Code
. BASIS FO	OR JURISDICTION		
. 213131		r jurisdiction in your	case:
heck the ontion	that pest describes the pasis to		
	that best describes the basis for		or agency is a defendant
U.S. Governm Diversity of C	nent Defendant: United States	or a federal official on dividual or corpora	
U.S. Governm Diversity of C and the amoun	nent Defendant: United States	or a federal official on dividual or corporation.	te citizens of different states
U.S. Government Diversity of County and the amount Federal Questions Federal Syou chose "Federal County Tennes of the County Tennes of the County Tennes of	nent Defendant: United States Citizenship: A matter between int in controversy exceeds \$75,00 stion: Claim arises under the College Under the College Under the College Under the College Under United States	or a federal official of ndividual or corpora 00.	te citizens of different states
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#### III. VENUE

This court can hear cases arising out of the Counties of New Castle, Kent, and Sussex in the State of Delaware.

Under 28 U.S.C § 1391, this is the right court to file your lawsuit if: (1) All defendants live in this state AND at least one of the defendants lives in this district; OR (2) A substantial part of the events you are suing about happened in this district; OR (3) A substantial part of the property that you are suing about is located in this district; OR (4) You are suing the U.S. government or a federal agency or official in their official capacities and you live in this district. Explain why this district court is the proper location to file your lawsuit.

Venue is appropriate in this Court because: \* Wilmington DE STATEMENT OF CLAIM IV. Place(s) of NY, NJ, DE, MD, PA occurrence: Date(s) of occurrence: State here briefly the FACTS that support your case. Describe how each defendant was personally involved in the alleged wrongful actions. **FACTS:** What happened to you? Page 4 of 8 Case 1:23-cv-01276-RGA

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1/		URIES
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If you	sustained injuries related to the events alleged above, describe them here.
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	1/10/10/1
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VI.	RELIEF
There	elief I want the court to order is:
THE	Money damages in the amount of: \$30,000,000 With DOT \$ DHS
	Money damages in the amount of: \$30,000,000 CONTITUOL & STORY
	Other (explain):

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# VII. CLOSING

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending or modifying existing law; and (3) complies with the requirements of Rule 11.

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Plaintiff's Signature

Rocquel Liwis

Frinted Name (Last, First, Wil)

POBOX 30411

Address

State Zip Code

Telephone Number

E-mail Address (if available)

List the same information for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.